



JOHN H. MERRILL
SECRETARY OF STATE

**INSTRUCTIONS FOR COMPLETING A FINAL APPLICATION FOR ELIGIBLE
ELECTION EXPENSES RELATED TO COVID-19 DURING THE JULY 14 RUNOFF
AND THE NOVEMBER 3 GENERAL ELECTION**
(Applications can only be submitted by County Commissions)

Part 1 - Submission of Application

These procedures are intended to provide the Secretary of State's Office with the information necessary to make a decision as to whether a county is eligible for funding related to its prevention, preparation and response to the COVID-19 pandemic as it specifically relates to the July 14, 2020 Runoff and the November 3, 2020 General Election.

The County Commission shall coordinate and submit the Application for reimbursement of any eligible and reasonable county elections expenses. Therefore, all county election officials must coordinate their needs through their County Commission for them to submit the request to the Secretary of State's Office.

To be eligible for funding, the county must email this application to the Alabama Secretary of State's Office with the following information:

- (a) A concise description of the item(s) or service(s) the County intends to fund/purchase.
- (b) A quote or invoice setting forth the cost for each item(s) or service(s) the County intends to fund/purchase.
- (c) A concise reason for each of the item(s) or service(s) the County intends to fund/purchase.
- (d) A certification form completed by the Chair/President of the County Commission confirming that all state purchasing and/or bid laws and/or local purchasing regulations have been followed related to the proposed funding or purchase request.

Any items approved for funding by the Secretary of State's Office CANNOT be requested by the county on your Claim for Reimbursement of Election Expense form submitted to the State Comptroller's Office.

The deadline for a County Commission to submit an Application is **December 1, 2020**. Any applications received after the deadline of December 1 will be rejected. It is imperative that you submit your applications by the deadline.

The completed application shall be submitted to Jesse Battles, Assistant to the Chief of Staff, at Jesse.Battles@sos.alabama.gov. For questions or concerns, he can also be reached at (334) 242-4133.



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Part 2 - Review of Application

Upon receipt of a completed application, the Secretary of State's Office shall review the submission and, if necessary, request additional information that may be deemed missing or required for review.

The Secretary of State's Office shall then determine whether the request(s) is/are a reasonable and allowable cost(s). The Secretary of State's Office shall determine whether or not the request(s) requires approval from the U.S. Election Assistance Commission or other authority.

Part 3 - Approval of Application

Upon approval of the application, the Secretary of State's Office shall:

- (a) Inform the County that approval was granted.
- (b) Record said approval amount on the Secretary of State's internal spreadsheet.
- (c) Request the issuance of a check from the Alabama Comptroller's Office to the County. Once the Secretary of State's Office obtains the check from the Alabama Comptroller's Office, it shall notify the County when the check has been sent to the County.

Part 4 - Denial of Application

If the Secretary of State's Office does not grant approval, the County will be emailed the reason(s) for the denial.

ALABAMA STATE CAPITOL
600 DEXTER AVENUE
SUITE S-105
MONTGOMERY, AL 36130



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WWW.SOS.ALABAMA.GOV
JOHN.MERRILL@SOS.ALABAMA.GOV

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APPLICATION FOR ELECTION EXPENSE FUNDING RELATED TO COVID-19

County Information

County Name:

Mailing Address:

(Address where check will
be mailed)

Name of Primary Contact:

Direct Telephone Number:

Email:

Name of Secondary Contact:

Direct Telephone Number:

Email:

Items Requested for Funding

Please complete this section indicating the items or services you will purchase or fund with the COVID-19 pandemic response expenditures. In order to be eligible to receive funds, you must complete all areas in this section. You must attach a quote or invoice for the items requested.

Items or Services to be Purchased or Funded with Concise Description	Cost of Items (Must attach quote or invoice)	Reason for Purchase/Funding
TOTAL:		

**Please provide details for each non-repeating item for which you are seeking funding.
Make additional pages, if necessary.**

Total Request & Certification

Total Amount of Funding Request

\$

I, _____, in my capacity as Sheriff of _____ County, submit this application for Election Expense Funding related to COVID-19.

(Sheriff shall sign this certification if any requested funding is applicable to the Sheriff)

I, _____, in my capacity as the Judge of Probate of _____ County, submit this application for Election Expense Funding related to COVID-19.

(Judge of Probate shall sign this certification if any requested funding is applicable to the Judge of Probate)

I, _____, in my capacity as the Absentee Election Manager of _____ County, submit this application for Election Expense Funding related to COVID-19.

(Absentee Election Manager shall sign this certification if any requested funding is applicable to the Absentee Election Manager)

I, _____, in my capacity as Chair/President of _____ County Commission, submit this application for Election Expense Funding related to COVID-19 for the aforesaid county.

By signing this application, I certify that all information contained herein is accurate and complete to the best of my knowledge, that all state purchasing and/or bid laws and/or local purchasing regulations have been strictly followed related to the proposed purchase(s), that the amount for which I am seeking funding will be spent only on items or services in this application and that no individual or company for which funding will be spent has been suspended or debarred from access to federal funds.

I acknowledge that any misrepresentation of truth or accuracy may require that all grant monies awarded to the county be returned to the Alabama Secretary of State's Office or the United States Election Assistance Commission and that any other penalties provided by Federal and State law may apply.

Name of County: _____

Signature of Chair/President
of the County Commission: _____

Date: _____

SWORN AND SUBSCRIBED before me on this _____ day of _____, 2020.

MY COMMISSION EXPIRES the _____ day of _____, 202__.

(SEAL)

SIGNATURE OF NOTARY PUBLIC

(NOTARIZATION REQUIRED ONLY FOR CHAIR/PRESIDENT OF COUNTY COMMISSION)